

# HAWAII STATE ETHICS COMMISSION

1001 BISHOP STREET, HONOLULU, HAWAII 96813

or P.O. BOX 616, HONOLULU, HAWAII 96809

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Web site: [www.hawaii.gov/ethics](http://www.hawaii.gov/ethics)

THIS SPACE FOR OFFICE USE ONLY

NOTE: This is a public document.

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## LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

STATE OF HAWAII  
STATE ETHICS COMMISSION

<b>PART I LOBBYIST</b>			
NAME (Last)	(First)	(Middle)	TELEPHONE
Maruyama	Lisa	T.	(808) 529-0454
MAILING ADDRESS (Street)			FAX
1020 South Beretania Street, 2nd Floor			EMAIL
			lmaruyama@hano-hawaii.org
(City)	(State)	(Zip Code)	
Honolulu,	Hawaii	96814	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
MAILING ADDRESS (Street)			FAX
			EMAIL
(City)	(State)	(Zip Code)	

<b>PART II ORGANIZATION</b>		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE
Hawai'i Alliance of Nonprofit Organizations (HANO)		(808) 529-0454
MAILING ADDRESS (Street)		FAX
1020 South Beretania Street, 2nd Floor		EMAIL
		lmaruyama@hano-hawaii.org
(City)	(State)	(Zip Code)
Honolulu	HI	96814
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		TELEPHONE
Lisa Maruyama		
MAILING ADDRESS (Street)		FAX
same as above		EMAIL
(City)	(State)	(Zip Code)

**PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY**

- |  |  |   |  |
|--|--|---|--|
| <input type="checkbox"/> Agriculture                               | <input type="checkbox"/> Education                                 | <input type="checkbox"/> Human Services                                     | <input checked="" type="checkbox"/> Science, Technology & Economic Development |
| <input type="checkbox"/> Communications & Public Utilities         | <input checked="" type="checkbox"/> Government Operation & Finance | <input type="checkbox"/> Intergovernmental Relations, International Affairs | <input type="checkbox"/> Tourism & Recreation                                  |
| <input checked="" type="checkbox"/> Consumer Protection & Commerce | <input type="checkbox"/> Hawaiian Affairs                          | <input checked="" type="checkbox"/> Labor & Employment                      | <input type="checkbox"/> Transportation  |
| <input type="checkbox"/> Culture, Arts, Historic Preservation      | <input type="checkbox"/> Health                                    | <input type="checkbox"/> Planning, Land & Water Use Management              | <input type="checkbox"/> Other: (indicate below)                               |
| <input type="checkbox"/> Ecology, Energy Environmental Protection  | <input type="checkbox"/> Housing                                   | <input type="checkbox"/> Public Safety & Corrections                        |  |

**PART IV CERTIFICATION OF LOBBYIST**

*I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.*



1/30/13

(Signature of Lobbyist)

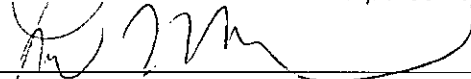
(Date)

**PART V AUTHORIZATION TO LOBBY**

NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED
Lisa Maruyama	President and CEO

NAME OF ORGANIZATION (if applicable)	TELEPHONE	
Hawai'i Alliance of Nonprofit Organizations	(808) 529-0454	
MAILING ADDRESS (Street)	FAX	
1020 South Beretania Street, 2nd Floor	EMAIL	
	lmaruyama@hano-hawaii.org	
(City)	(State)	(Zip Code)
Honolulu,	HI	96814

*I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.*



1/30/13

(Signature of Authorizing Officer or Person Represented)

(Date)